

PTO/SB/122 (09-04)
Approved for use through 7/31/2006. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application													
Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	<table border="1"> <tr> <td>Application Number</td> <td>09/721,233</td> </tr> <tr> <td>Filing Date</td> <td>11/22/2000</td> </tr> <tr> <td>First Named Inventor</td> <td>Debbins</td> </tr> <tr> <td>Art Unit</td> <td>2193</td> </tr> <tr> <td>Examiner Name</td> <td>William H. Wood</td> </tr> <tr> <td>Attorney Docket Number</td> <td>GEMS8081293</td> </tr> </table>	Application Number	09/721,233	Filing Date	11/22/2000	First Named Inventor	Debbins	Art Unit	2193	Examiner Name	William H. Wood	Attorney Docket Number	GEMS8081293
Application Number	09/721,233												
Filing Date	11/22/2000												
First Named Inventor	Debbins												
Art Unit	2193												
Examiner Name	William H. Wood												
Attorney Docket Number	GEMS8081293												

RECEIVED
CENTRAL FAX CENTER
SEP 22 2005

Please change the Correspondence Address for the above-identified patent application to:

☒ The address associated with Customer Number: **27061**

OR

☐ Firm or Individual Name

Address

City State Zip

Country

Telephone Fax

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the:

☐ Applicant/Inventor

☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or agent of record. Registration number 48,885

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature *[Signature]*

Typed or Printed Name J. Mark Wilkinson

Date September 22, 2005 Telephone 262.376.5170

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple Forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comment on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.